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CONFIRMATION NO. 7308

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/679,394	<b>FILING OR 371(c) DATE</b> 10/03/2000 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3739	<b>ATTORNEY DOCKET NO.</b> S-9-2	
<b>APPLICANTS</b> Jean Woloszko, Mountain View, CA; Theodore C. Ormsby, Milpitas, CA; John J. Quackenbush, Santa Clara, CA; Brian Martini, Menlo Park, CA;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/224,107 08/09/2000					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/20/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 51	<b>TOTAL CLAIMS</b> 66	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 21394					
<b>TITLE</b> APPARATUS FOR TREATMENT OF SPINAL DISORDERS					
<b>FILING FEE RECEIVED</b> 889	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		